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COVER LETTER

·TO:

	ECT: American Life & Security Corp				
Name o	of Corporation				
DOCUMENT NUMBER: F21000003511					
The en	closed Statement of Change of Registered Office/Agent and fee are submitted for filing				
Please	Please return all correspondence concerning this matter to the following:				
Daniel	Maloney				
Name o	of Contact Person				
Americ	an Life & Security Corp				
Firm/C	ompany				
2900 Sc	outh 70th Street, Suite 400				
Addres	SS .				
Lincoln	a, NE 68506				
City/St	ate and Zip Code				
	dmaloney@midwestholding.com				
E	address: (to be used for future annual report notification)				

Enclosed is a \$35.00 check made payable to the Department of State.

Mailing Address: Amendment Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

Name of Contact Person

Street Address:

Amendment Section **Division of Corporations** The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

at (402) 489-8266 Area Code & Daytime Telephone Number

CR2E045 (04/13)

Daniel Maloney



October 10, 2022

Amendment Section **Division of Corporations** PO Box 6327 Tallahassee, FL 32314

RE:

American Life & Security Corp

Statement of Change of Registered Agent

Dear Amendment Section Personnel,

Enclosed please find the above-referenced statement on behalf of American Life & Security Corp. Also enclosed please find a check for the \$35.00 filing fee.

Please feel free to contact me if you have any questions or need additional information.

Respectfully submitted,

Alundak Sunt

Rhonda K. Grant

President & CEO

CC:

Georgette C. Nicholas, CEO American Life & Security Corp

Krystal Rourke, Associate **Grant Consulting Group**

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

statement of ch	ange is submitted for a corpo	502, 617,0502, 607,1508, or 617,1508, Florida Storation organized under the laws of the State of $\frac{N_0}{N_0}$	ebraska	
	the corporation: American Lin	ice or registered agent, or both, in the State of Fla fe & Security Corp	orida.	
2. The principal	office address: 2900 South 70	Oth Street, Suite 400, Lincoln, NE 68506		
	A CONTRACTOR S			
		P3 2021 F21000003	511	
4. Date of incor	poration/qualification:	23, 2021 Document number: F21000003		
	d street address of the current rtment of State: (If resigned, o	registered agent and registered office on file with enter resigned)	1 the	
	Cogency Global Inc		2022 SEA	
	115 N CALHOUN ST STE 4		OCT	
	TALLAHASSEE, FL 32301		- F	
6. The name and (if changed):	I street address of the new reg	gistered agent (if changed) and /or registered offic	2022 OCT IL AMII: 50 SEGNALALASSEELFL	
	Florida Chief Financial Office	er	mı O	
	FLORIDA DEPARTMENT	OF FINANCIAL SERVICES		
P.O. Box, NOT acceptable				
	200 East Gaines Street, Tallah	nassee, FL 32399		
The street address changed will	ess of its registered office an be identical.	id the street address of the business office of its	registered agent.	
Such change wa authorized by:th	ns authorized by resolution d ne board, or the corporation l	haly adopted by its board of directors or by an ol has been notified in writing of the change.	fficer so	
Daviel S. 1	_	Daniel Maloney, EVP Accting/Finan	ice & Treasurer	
-	tot an officer or director	Printed or typed name and title		
l further agree t if my duties, an locument is bei	the appointment as registere to comply with the provision of I am familiar with and according filed merely to reflect a continuous per notified in writing of t	ed agent and agree to act in this capacity, is of all statutes relative to the proper and composept the obligation of my position as registered change in the registered office address, I hereby this change.	lete performance agent. Or, if this confirm that the	
Sign	nature of Registered Agent	Date		
f signing on bel	half of an entity:			
Tr.	must be Drinted Noon.			

* * * FILING FEE: \$35.00 * * *

Make Checks Payable to Florida Department of State Mail to: Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314 CR2E045 (04/13)